1-800-852-7550

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WITE WITE

EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802;

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Department of Health Services Toxic Substances Control Division Sacramento, California

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Waste Flammable Liquid, N.O.S. EPA/Other	eas	
Coast To Coast Analytical 141 Suburban Rd. C-4, San Luis Obispo, CA 93401 4. Generator's Phone (805) 543-2553 5. Transporter 1 Company Name Omega Recovery Systems C A D O 2 2 4 5 0 0 1 9. Designated Facility Fame and Site Address 10. US EPA ID Number Omega Recovery Systems 12504 E. Whittier Blvd. Whittier, CA 90602 C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 F. Transporter's Phone C State Transporter's Phone G. State Facility's ID C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 C A D O 4 2 2 4 5 0 0 1 C A D O 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	w.	
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Flammable Liquid UN 1993 0[0]2 D[M 0]0[1]1[0 G D001, Baste Combustable Liquid, N.O.S.	5005	
Combustable Liquid, NA 1993 0011 DM 00055 G DOOL	D009	
State		
EPA/Other		
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d. State		
EPA/Other		
J. Additional Descriptions for Materials Listed Above - K. Handling Codes for Wastes Listed Above		
Neutral Aqueous Waste Containing Solvent		
and Heavy Metals	i i i	
15. Special Handling Instructions and Additional Information	4	
Please Bill: NG Chemical, Inc. 4210 Brookside Place, Santa Maria, CA. 93455 Omega Accept. # 16953 ERG # 27		
16.		
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and		
national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined.	rmined	
to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimis present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my w	zes the	
generati∪n and select the best waste management method that is available to me and that I can afford.		
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CHONNET SECTIONAL CONST STREET STREET	10/10	
T	Day Year	
N France Type Maile 1/17/17	20912	
18. Transporter 2 Acknowledgement of Receipt of Materials		
T Printed Typed Name	Day Year	
E R		
19. Discrepancy Indication Space		
F A C		
C I		
L 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		
T Y Printed/Typed Name Signature / / Month		
FRANK FERD INTI	Day Year	